

PLEASE COMPLETE REVERSE SIDE. APPLICATION MUST BE FULLY COMPLETED TO BE CONSIDERED

EMPLOYMENT HISTORY (*beginning with most recent. If more space is necessary, attach additional sheet*)

Firm Name	Address	Dates	(From)	(To)
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Position	Reason for Leaving	Salary
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Firm Name	Address	Dates	(From)	(To)
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Position	Reason for Leaving	Salary
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HAVE YOU PREVIOUSLY WORKED FOR THE TOWN OF HUNTINGTON? ____NO ____YES WHEN?_____

EDUCATION

Schools Attended	Name & Address	Major Subject	Last Grade Completed	Degree Obtained
High School	_____			
College	_____			
Graduate	_____			
Other Training or Education	_____			

REFERENCES (*No Family Members*)

1.Name:_____Relationship:_____Phone#:_____

2.Name:_____Relationship:_____Phone#:_____

Applicant's Declaration:

I declare, subject to penalties of perjury, that the statements made in this application (including statements made in accompanying papers) have been examined by me and to the best of my knowledge and belief are true and correct.

_____	_____
Date	Signature of Applicant

RETURN COMPLETED APPLICATION AND APPLICANT DATA FORM TO: *Town of Huntington, Personnel Office,
100 Main Street, Huntington, NY 11743*

THE TOWN OF HUNTINGTON IS AN EQUAL OPPORTUNITY EMPLOYER

APPLICANT DATA INFORMATION

Pursuant to federal regulations, the Town of Huntington collects responses to the questions below for record keeping purposes. The form will be detached from your application and will be kept separate and confidential. Providing this information is voluntary.

Check the box for the racial or ethnic group with which you identify.

- ☐ *White*
- ☐ *Black*
- ☐ *Hispanic*
- ☐ *Asian or Pacific Islander*
- ☐ *American Indian or Alaskan Native*

Check the appropriate box:

- ☐ *Female*
- ☐ *Male*

Please indicate your date of birth ____/____/____

Please indicate the position you have applied for:
